



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 71341

**Title:** Successful embolization of an intrahepatic portosystemic shunt using balloon-occluded retrograde transvenous obliteration: a case report

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03253490

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor, Doctor

**Reviewer's Country/Territory:** Turkey

**Author's Country/Territory:** Japan

**Manuscript submission date:** 2021-09-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-10 13:42

**Reviewer performed review:** 2021-09-10 14:21

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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### SPECIFIC COMMENTS TO AUTHORS

Saito H. et al. presented a case report which discusses the efficacy of percutaneous balloon-occluded retrograde transvenous obliteration for treating patients with intrahepatic portosystemic shunts. Balloon occluded retrograde transvenous obliteration is a known method for treatment of gastric varices. There are also some studies ( case series) about using balloon occluded retrograde transvenous obliteration for the treatment of hepatic encephalopathy (HE) secondary to portosystemic shunt (PSS) in cirrhotic patients. The method is not unique. Case series may be more interesting rather than a case report. Some issues raised; 1-Introduction part:The authors may give some information about the usage of balloon occluded retrograde transvenous obliteration for portosystemic shunt in cirrhotics. If your method is different from others, please give more information and tell your differences. 2- Case: This section may contain more information about the liver function tests of the patient (AST,ALT,ALP,GGT,T.Bilirubin,d.bilirubin, INR,protein electrophoresis, viral hepatitis markers, fibroscan vs..)may contain more information about physical examination findings. 3-Discussion: There are some information about portosystemic shunt treatment in cirrhotics but, the authors would give more information about the studies about using balloon occluded retrograde transvenous obliteration for the treatment of hepatic encephalopathy (HE) secondary to portosystemic shunt (PSS) in cirrhotic patients. Is your treatment different from the treatment modalities which were used in these studies? Thank you for giving opportunity to review this case report.



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**Reviewer's code:** 03755117

**Position:** Editorial Board

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**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** Japan

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<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="checkbox"/> ] Anonymous [ <input type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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### **SPECIFIC COMMENTS TO AUTHORS**

The case report is interesting and address a debated topic. I suggest an improvement in:

Laboratory examination section: more data about liver function and on the exclusion at least of majour causes of liver disease Imaging examination section: more data about liver morphology. These informations are needed to strenght the exclusion af any advanced liver disease.